, , , , , , , , , , , , , , , , , , ,										n or Docket Number				
	PATENT APPLICATION FEE DETERMINATION RECOR								10 09/801/25					
Effective October 1, 2000								1591-1050001						
CLAIMS AS FILED - PART I									NTITY		OTHER	THAN		
			1)	(Column 2)			TYPE			OR SMALL ENTITY				
TOTAL CLAIMS		10					RATE	FEE		RATE	FEE			
FOR			NUMBER FILED		NUMBER EXTRA		8	ASIC FEE	355.00	OR	BASIC FEE	710.00		
TOTAL CHARGEABLE CLAIMS			/0 minus 20=		. 6			X\$ 9=		OR	X\$18=	-		
INDEPENDENT CLAIMS			5 minus 3 =		2		ı	X40=		OR	X80=	160		
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT					+135=		OR	+270=	-		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	1/1	OR	TOTAL	\$7 <i>1</i> 2		
CLAIMS AS AMENDED - PART II									7		OTHER	THAN		
_	810	nn 2)	(Column 3)	_:	SMALL	ENTITY	OR	SMALL	ENTITY					
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	.17	Minus	a	0	= '	I	X\$ 9=		OR	X\$18=			
	Independent	.5	Minus	•••		e .	Γ	X40=		OR	X80=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									5				
							L	+135=		OR	+270=			
								TOTAL DIT. FEE		OR	TOTAL ADDIT, FEE			
·	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST								•	,				
AMENDMENT B		CLAIMS . REMAINING		NUM		PRESENT	Г	DATE	ADDI-			ADDI-		
		AFTER AMENDMENT		PREVIO		EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE		
	Total	•	Minus	**		=		X\$ 9=	,	OR	X\$18=			
	Independent	·	Minus	***	CI 4/14	=		X40=		OR.	X80=			
	FIRST PRESE	ALTIPLE DE	CHUCKI	CLAIM	LAIM		+135=		OR	+270=				
							<u>_</u>	TOTAL		OP.	TOTAL			
	(Column 1) (Column 2) (Column 3)							OIT. FEE			ADDIT. FEE			
,		CLAIMS		HIGH	EST		_		ADDI-			4001		
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	ï		
	Independent	•	Minus	***		*	$\vdash$	X40=			Y80			
	FIRST PRESE	NTÁTION OF MU	JLTIPLE DEF	ENDENT	CLAIM		-	A4U=		OR	X80=			
+135= +135=											+270=			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  **OPTION OF TOTAL ADDIT. FEE  **OPTION OF TOTAL ADDIT. FEE														
•	ir ele inignest Num The "Highest Num	mber Previously Pai ber Previously Pai	d For (Total o	o SPACE I Independe	s less the ent) is the	n 3, enter "3." highest number	found	I in the app	ropriate box					

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